

CONNECTICUT STATE DEPARTMENT OF EDUCATION
Division of Teaching and Learning Programs and Services
Bureau of Health and Nutrition Services and Child/Family/School Partnerships
25 Industrial Park Road
Middletown, Connecticut 06457-1543

M E M O R A N D U M

TO: 2005 Summer Food Service Program (SFSP) Sponsors
FROM: Maureen B. Staggenborg, Director, Child Nutrition Programs
DATE: June 9, 2005
SUBJECT: **Operational Memorandum #06-05 – SFSP**
(1) Waiver of the First-Week Visit Requirement
(2) Restricted Open Site Documentation

(1) Waiver of the First-Week Visit Requirement

Section 225.15(d)(2) of the SFSP regulations requires all sponsoring organizations to "visit each of their sites at least once during the first week of operation under the Program and . . . [to] promptly take such actions as are necessary to correct any deficiencies." The purpose of this requirement is to ensure that SFSP sponsors are aware of operational problems at sites at the beginning of the Program, and can take action to correct such problems before they result in the establishment of a fiscal claim against the sponsor.

All sponsors are permitted to request a first-week visit waiver for sites with experienced staff and no significant operational problems in the prior year. Sponsors must apply for the waiver and receive approval from the State agency prior to the opening date of the site. This memorandum does not grant blanket approval of eliminating first week visits. If a site waiver is not granted, the sponsor is responsible for conducting all required first-week visits.

Sponsors interested in applying for a waiver may do so by completing the attached form. ***A form must be completed for each site for which a waiver is requested.*** Waiver approvals will be permitted for one (1) year with the possibility of additional renewals. Sponsors with sites which were granted waivers in 2004 may exercise one of two options for 2005; (1) submit a new waiver request form; or (2) submit a letter listing the sites granted waivers in 2004 with an indication that experienced staff remain at the site and that no significant operational problems occurred in 2004.

(2) Special Restricted Open Site Documentation

Special Restricted Open Site is allowable if it is located in a non-needy area, but otherwise, meets the criteria for open site eligibility. An example would be a type of site that is located outside of the city in which all areas are eligible (based on school enrollment or census data); the children from the city are bussed to the non-needy location without cost.

To provide documentation and obtain approval for a ***Special Restricted Open Site***, the enclosed *Clarification Form* must be completed and submitted. If ED-099 Schedule C-1 (Site Information Document) materials already submitted do not have this clarification, it will be requested.

Questions regarding these issues may be directed to the designated Child Nutrition staff member who is reviewing your SFSP application. Maureen Staggenborg at (860) 807-2070, Susan Bohuslaw at (860) 807-2073 or Robert Zwack at (860) 807-2081.

MBS:mbs
k/cnsharedopmemos.om#6-05-SFSP-(6-8-05)
Enclosure

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SUMMER FOOD SERVICE PROGRAM (SFSP)

SPECIAL RESTRICTED OPEN SITE CLARIFICATION FORM

Agreement No.: _____ Date: _____

Sponsor Name: _____

Name of Site: _____

Site Address: _____

1. Briefly describe the program being operated at this site: _____

2. All children at the site are exclusively from low-income areas: ☐ yes ☐ no *If no, ineligible as Restricted Open Site.*

List pick-up points/bus routes

Eligibility percentage for each
pick-up point (school or census data)

Example: Garden Street, Norwich

Example: School – Bishop 69% free/reduced 10/04 data

3. Is the program being operated open to broad community participation daily?

☐ yes, *Describe* _____ ☐ no *If no, ineligible as Restricted Open Site.*

4. Is there a fee charged for participation in the program?

OVER ➔

☐ yes *If yes, ineligible as Restricted Open Site.* ☐ no

5. Are children from the surrounding non-needy area permitted to attend?

☐ yes *If yes, ineligible as Restricted Open Site.* ☐ no

Signature of Personnel completing form

Date

Title

State Agency Use Only

☐ Approved

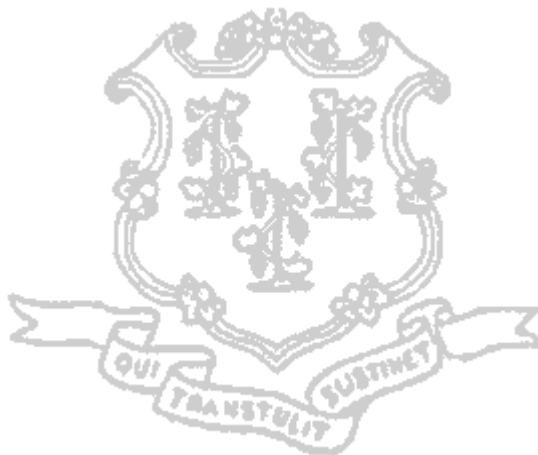
☐ Denied *Reason:* _____

Date Sponsor notified: _____

Means of Transmittal: _____

Signature of S/A personnel

Date



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SUMMER FOOD SERVICE PROGRAM (SFSP)

WAIVER OF FIRST WEEK VISIT REQUIREMENT:

SITE APPLICATION

Agreement No.: _____ Date: _____

Sponsor Name: _____

Name of Site: _____

Site Address: _____

Name of Site Supervisor: _____

Type of Site: ☐ School ☐ Non-School

Did the site participate in your prior year SFSP? ☐ yes ☐ no *If no, ineligible for waiver*

Is this site supervisor a skillful, capable and experienced food service worker? ☐ yes ☐ no *If no, ineligible for waiver*

Briefly describe results of prior year sponsor SFSP monitoring at this site.

Note: The state agency reserves the right to deny a waiver based on prior state agency review findings at the site.

State Agency Use Only

☐ Approved Time period: _____

☐ Denied Reason: _____

Date Sponsor notified: _____ Means of Transmittal: _____

Signature of S/A personnel

Date

